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## FACSIMILE COVER SHEET

**DATE:** November 21, 2007

**TO:** MS: ISSUE FEE

**FAX NO.:** 571-273-2885

**FROM:** Jeffrey G. Toler  
Reg. No.: 38,342

**RE U.S. App. No.:** 10/655,576, filed September 4, 2003

**Applicant(s):** Guy Bevente, et al.

**Atty Dkt No.:** 1033-SS00424

**Title:** SHARED USAGE TELECOMMUNICATIONS BILLING SYSTEM  
AND METHOD

**NO. OF PAGES (including Cover Sheet):** 17

### MESSAGE:

Attached please find:

- ☒ Transmittal Form (1 pg)
- ☒ Issue Fee Transmittal [in duplicate] (2 pgs)
- ☒ Fee Address Indication Form (1 pg)
- ☒ Amendment After Allowance with Drawings (11 pg)
- ☒ Revocation and POA (1 pg)

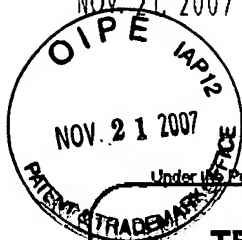
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PTO/SB/21 (11-07)

Approved for use through 11/30/2007. OMB 0851-0031

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<b>TRANSMITTAL FORM</b>  <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/655,576
	Filing Date	September 4, 2003
	First Named Inventor	Guy Bevente, et al.
	Art Unit	2617
	Examiner Name	TAYLOR, Barry W.
Total Number of Pages in This Submission	Attorney Docket Number	1033-SS00424

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Tables on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1) Fee Address Indication Form 2) Amendment After Allowance 3) Revocation and POA
Remarks  <div style="text-align: center; font-size: 1.2em;">Customer No.: 60533</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Toler Law Group, Intellectual Properties		
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Printed name	Jeffrey G. Toler		
Date	11-21-2007	Reg. No.	38,342

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